

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42340

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: YOUTH WITH A MISSION, INC.

**Current Principal Place of Business:**

20131 FM RD 16 W  
LINDALE, TX 75771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 3000  
LINDALE, TX 75771 US

**New Mailing Address:**

P O BOX 2291  
LINDALE, TX 75771 US

FEI Number: 65-0253251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MORGAN, CHARLES O., JR.  
1300 NW 167TH ST  
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ALLEGRETTO, RICK,  
Address: 20131 FM RD 16 W  
City-St-Zip: LINDALE, TX 75771

Title: DV ( ) Delete  
Name: LANDIS, WILLIAM A.,  
Address: PO BOX 198 READING  
City-St-Zip: MONTEGO BAY, JAMAICA, ST JAMES

Title: D ( ) Delete  
Name: ALLEGRETTO, JOHN  
Address: 16702 MEADOW CREST  
City-St-Zip: LINDALE, TX 75771

Title: D ( ) Delete  
Name: MAIFIELD, MARYBETH  
Address: 4444 EDGAR PARK AVE  
City-St-Zip: EL PASO, TX 79904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ALLEGRETTO

D

01/30/2009

Electronic Signature of Signing Officer or Director

Date